

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KW		9/1/00
O.I.P.E. CLASSIFIER		59	9/2/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			7/29

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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2	✓	✓	7/23/00
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40	✓	✓	7/23/00
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50	✓	✓	7/23/00

Claim	Final	Original	Date
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52	✓	✓	7/23/00
53	✓	✓	7/23/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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